

D.I. # _____**CIVIL ACTION****NUMBER:** 07-374 (GMS)U.S. POSTAL SERVICE
CERTIFIED MAIL RECEIPT(S)

9349
2585 0002
1680 0003
7003

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	RON MEYERS
Sent To	DEPUTY ATTORNEY GENERAL 07-374
Street, Apt. No.; or PO Box No.	820 N. FRENCH STREET
City, State, ZIP+4	WILMINGTON, DE 19801 Oms

PS Form 3800, June 2002 See Reverse for Instructions

